

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31890

FILED
Mar 27, 2009
Secretary of State

Entity Name: DORAL PARK COUNTRY CLUB VILLAS CONDOMINIUM NO. 11 ASSOCIATION, INC.

Current Principal Place of Business:

ALLIED PROPERTY GROUP, INC.
12350 SW 132 CT. # 114
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

ALLIED PROPERTY GROUP, INC.
13200 SW 128 STREET, SUITE B-2
MIAMI, FL 33186

New Mailing Address:

FEI Number: 65-0155537 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LAW OFFICES OF TONY PORNPRINYA
10800 BISCAYNE BLVD.
SUITE 988
MIAMI, FL 33161 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARRETT, LISA
Address: 4690 NW 102 AVE. #204
City-St-Zip: MIAMI, FL 33178

Title: ST () Delete
Name: ALIAGA, LEILA
Address: 4700 NW 102 AVE. #203
City-St-Zip: MIAMI, FL 33178

Title: VP (X) Delete
Name: YAUZZI, ALBERTO
Address: 690 NW 102 AVE. #201
City-St-Zip: DORAL, FL 33178

Title: S (X) Delete
Name: AYDEE, RAMIREZ
Address: 4690 NW 102 AVE. # 103
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: YANUZZI, ALBERTO
Address: 690 NW 102 AVE. #201
City-St-Zip: MIAMI, FL 33178

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA BARRETT

PD

03/27/2009

Electronic Signature of Signing Officer or Director

Date